

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1.  Fee Transmittal Form  
(Submit an original, and a duplicate for fee processing)
2.  Specification      Total Pages
3.  Drawing(s) (35 USC 113)      Total Sheets
4.  Oath or Declaration      Total Pages 
  - a.  Newly executed (original or copy)
  - b.  Unexecuted for information purposes
  - c.  Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 17 completed)  
[Note Box 5 below]

i.  **DELETION OF INVENTOR(S)**

Signed Statement attached deleting  
inventor(s) named in the prior application, see  
37 CFR 1.63(d)(2) and 1.33(b).

5.  Incorporation By Reference (useable if Box 4c is checked)  
The entire disclosure of the prior application, from which a copy of  
the oath or declaration is supplied under Box 4c, is considered as  
being part of the disclosure of the accompanying application and is  
hereby incorporated by reference therein.

**ADDRESS TO:** Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

6.  Microfiche Computer Program (Appendix)
7. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
  - a.  Computer Readable Copy
  - b.  Paper Copy (identical to computer copy)
  - c.  Statement verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

8.  Assignment Papers (cover sheet & document(s))
9.  37 CFR 3.73(b) Statement  
(when there is an assignee)       Power of Attorney
10.  English Translation Document (if applicable)
11.  Information Disclosure Statement (IDS)/PTO-1449       Copies of IDS Citations
12.  Preliminary Amendment
13.  Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
14.  Small Entity Statement(s)       Statement filed in prior application  
Status still proper and desired
15.  Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16.  Other: \_\_\_\_\_

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation       Divisional       Continuation-in-part (CIP) of prior application No. \_\_\_\_\_

**18. CORRESPONDENCE ADDRESS**

|                                                                       |                                                              |  |          |                                                       |
|-----------------------------------------------------------------------|--------------------------------------------------------------|--|----------|-------------------------------------------------------|
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label | 05514<br>(Insert Customer No. or Attach bar code label here) |  | or       | <input type="checkbox"/> Correspondence address below |
| NAME                                                                  |                                                              |  |          |                                                       |
| Address                                                               |                                                              |  |          |                                                       |
| City                                                                  | State                                                        |  | Zip Code |                                                       |
| Country                                                               | Telephone                                                    |  | Fax      |                                                       |

| CLAIMS | (1) FOR                                                                    | (2) NUMBER FILED | (3) NUMBER EXTRA              | (4) RATE                      | (5) CALCULATIONS |
|--------|----------------------------------------------------------------------------|------------------|-------------------------------|-------------------------------|------------------|
|        | TOTAL CLAIMS<br>(37 CFR 1.16(c))                                           | 100-20           | 80                            | X \$ 18.00 =                  | \$1440.00        |
|        | INDEPENDENT CLAIMS (37 CFR 1.16(b))                                        | 26-3 =           | 23                            | X \$ 78.00 =                  | \$1794.00        |
|        | MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))                 |                  |                               | \$260.00 =                    | 0                |
|        |                                                                            |                  |                               | BASIC FEE<br>(37 CFR 1.16(a)) | \$ 690.00        |
|        |                                                                            |                  | Total of above Calculations = |                               | \$3924.00        |
|        | Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28). |                  |                               |                               |                  |
|        |                                                                            |                  |                               | TOTAL =                       | \$3924.00        |

19. Small entity status

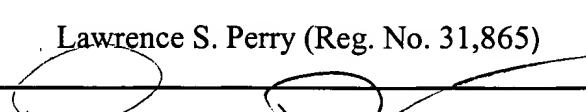
- a.  A Small entity statement is enclosed
- b.  A small entity statement was filed in the prior non-provisional application and such status is still proper and desired.
- c.  Is no longer claimed.

20.  A check in the amount of \$3924.00 to cover the filing fee is enclosed.

21.  A check in the amount of \$40.00 to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a.  Fees required under 37 CFR 1.16.
- b.  Fees required under 37 CFR 1.17.
- c.  Fees required under 37 CFR 1.18.

| <b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED</b> |                                                                                      |
|------------------------------------------------------------|--------------------------------------------------------------------------------------|
| NAME                                                       | Lawrence S. Perry (Reg. No. 31,865)                                                  |
| SIGNATURE                                                  |  |
| DATE                                                       | June 6, 2000                                                                         |